## FOR INSTRUCTIONS, SEE BACK OF FORM

File low: thics and Campaign
Dis/ sure Board
51/ 12<sup>th</sup>, Ste. 1A
Des virolnes, lowa 50319

Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees IGN DISCLOSURE BD. for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

	Reset For	m	
COMMITTEE NAME (Must be same as on Statement of Organization	ion)	FORES	
Committee To Elect Mike Wolf	-	DR-2	DISCLOSURE
IMPORTANT: Indicate by # type of committee you are reporting for:  (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) Sta (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (9) City PAC (10) School Board (11) Local Ballot Issue	te PAC(3 )State Party (7 )School Board or Other Political	(Rev. 12/20	09) REPORT  se Orlly 7129
CANDIDATE COMMITTEES ONLY: Candidate Name  We Wolf	Political Party (if applicable)	Logged In	
Office Sought County Attorney	District (if Senate or House)		-
Late reports are subject to possible civil and criminal penalties. Pursuar candidate's committee, and the chairperson, for any other type of committee.	nt to lowa Code sections 68B.32A hittee, is the individual responsible	e for filing timely and	he candidate, for a accurate reports.
		Particular de la constant de la cons	ATE SIGNED
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	U.F.	ATE SIGNED
I AM FILING A 10-19-14 (report date)	REPORT FOR (1) ELECTION		N YEAR.
CHECK IF AMENDMENT TO REPORT DATED		Local Committees, er	nter Date of Election
☐ Check if this is final (termination) report and attach Notice of Dis (You must continue to file reports until a DR-3 is filed.)	ssolution Form DR-3.	County & Local Communich Election is held	l l
STATEMENT OF CASH ON HAND			
cash on Hand at the beginning of the reporting period. (Total of committee. This amount MUST be the same as the cash of the last reporting period or must be zero if this is first re-	on hand at the end	\$	1977.27
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule A	A) (*also see in-kind below)		<u>Q</u>
Schedule F: Loans Received total (Attach Schedule F)			$\mathcal{L}$
Schedule H: Total Sales of Campaign Property (Attach S	Schedule H)		
(Schedule H applies to Candidates' Committee	sub-TOTAL	\$	1977.27
SUBTRACT TOTAL MONEY SPENT THIS PERIOD  Schedule B: Expenditures total (Attach Schedule B) (**a  Schedule F: Loan Repayments total (Attach Schedule F)			0
CASH ON HAND at the end of this reporting period (if final report			1977, 27
**UNPAID BILLS (From Schedule D - Attach Schedule D)	2000年1月2日 - 100 ·	TO A STATE OF THE PARTY OF THE	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule			85.12
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F			11.416.25
CONSULTANT BREAKDOWN (Schedule G Attached?)	<i>/</i>	YES	//NO
CANDIDATE COMMITTEES ONLY:			o Carlinosona Company
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach )	Schedule H)	\$	0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

COMMITTEE NAME (Must be same as on Statement of Organization) A CN DISCLOSURE BD.  COMMITTEE NAME (Must be same as on Statement of Organization) A CN DISCLOSURE BD.  Reset Form				IN-KIND CONTRIBUTIONS THIS BOX IF ING FORM	
DATE					
RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
9-30-14	Clonton County Repuls. Central Comm. Clonton	N/A	Ad in Clar Hearld ad	85.12	
	Iowa 52732		The Color		
SUB-TOTAL \$ 85.12  TOTAL (if last page of this schedule) 85.12					
*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.					

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SCHEDULE

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RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOA
		(if Applicable*)	
		The second secon	\$
		4104	
	-	1	
1			
The second secon			

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAI
			\$
1			

TOTAL CASH REPAYMENTS (PART II) \$ 0.00 From Schedule E - TOTAL LOANS FORGIVEN s 0.00 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 11,416.25

*Disclosure la	TOTAL OUTSTANDING LOANS END OF REF
making aw requires candidate come	DIMO CONVO END OF REF
consequipite (%)	nittees to disclose the relationship of any relative Relationship must be shown to the third degree of y (relatives by marriage). If suggests
the same and (blood relatives) and affinit	Relationship must be shown to the third degree of y (relatives by marriage). If sumame of contributor is milial relationship, enter "not applicable".
relationship as candidate, but there is no far	y (relatives by marriage). If sumame of contributor is milial relationship, enter "not applicable" in the
relationship column when it applies	relationship, enter "not applicable" is
	abblicable to the
	The state of the s

\_ of 1 (for Schedule F)